

**Application Data Sheet**

**Application Information**

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

A Method for Treating a Stiffened Blood Vessel

Attorney Docket Number::

084329-000000US

Request for Early Publication::

No

Request for Non-Publication::

No

Suggested Drawing Figure::

1

Total Drawing Sheets::

11

Small Entity?::

Yes

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Australia  
Status:: Full Capacity  
Given Name:: Ronald  
Middle Name:: Mark  
Family Name:: Gillies  
Name Suffix::  
City of Residence:: Enmore, New South Wales  
State or Province of Residence::  
Country of Residence:: Australia  
Street of Mailing Address:: 149 Edgeware Road  
City of Mailing Address:: Enmore, New South Wales  
State or Province of mailing address::  
Country of mailing address:: Australia  
Postal or Zip Code of mailing address:: 2042

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Peter  
Middle Name::  
Family Name:: Walsh  
Name Suffix::  
City of Residence:: Everton Park Queensland  
State or Province of Residence::  
Country of Residence:: Australia  
Street of Mailing Address:: 21 Reedan Street  
City of Mailing Address:: Everton Park Queensland  
State or Province of mailing address::

Country of mailing address:: Australia

Postal or Zip Code of mailing address:: 4053

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Jim

Middle Name::

Family Name:: Iliopoulos

Name Suffix::

City of Residence:: Bexley North New South Wales

State or Province of Residence::

Country of Residence:: Australia

Street of Mailing Address:: 47 Oliver Street

City of Mailing Address:: Bexley North New South Wales

State or Province of mailing address::

Country of mailing address:: Australia

Postal or Zip Code of mailing address:: 2207

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Australia

Status:: Full Capacity

Given Name:: Alberto

Middle Name:: Pompeo

Family Name:: Avolio

Name Suffix::

City of Residence:: North Bondi New South Wales

State or Province of Residence::

Country of Residence:: Australia

Street of Mailing Address:: 2 Knowles Avenue

City of Mailing Address:: North Bondi New South Wales

State or Province of mailing address::

Country of mailing address:: Australia

Postal or Zip Code of mailing address:: 2026

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Australia

Status:: Full Capacity

Given Name:: William

Middle Name::

Family Name:: Walsh

Name Suffix::

City of Residence:: Maroubra New South Wales

State or Province of Residence::

Country of Residence:: Australia

Street of Mailing Address:: 16 Kitchener Ave.

City of Mailing Address:: Maroubra New South Wales

State or Province of mailing address::

Country of mailing address:: Australia

Postal or Zip Code of mailing address:: 2035

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Australia

Status:: Full Capacity

Given Name:: Michael

Middle Name::

Family Name:: O'Rourke

Name Suffix::

City of Residence:: Hunters Hill New South Wales

State or Province of Residence::

Country of Residence:: Australia

Street of Mailing Address:: 59 Woolwich Road

City of Mailing Address:: Hunters Hill New South Wales  
State or Province of mailing address::  
Country of mailing address:: Australia  
Postal or Zip Code of mailing address:: 2110

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Designation::	Representative Number::	Representative Name::
Primary	37,505	Joe Liebeschuetz
Associate	37,505	Joe Liebeschuetz

### **Domestic Priority Information**

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
This Application	US national phase of	PCT/AU2003/001699	December 19, 2003

### **Foreign Priority Information**

Country::	Application number::	Filing Date::
Australia Provisional Application	2002953440	December 19, 2002

### **Assignee Information**

Assignee Name:: Unisearch Limited  
Street of mailing address:: University of New South Wales  
Rupert Myers Building, Gate 14  
Barker Street  
City of mailing address:: Kensington  
State or Province of mailing address:: New South Wales  
Country of mailing address:: Australia  
Postal or Zip Code of mailing address:: 2052